

CLAIMS ONLY							Application Number 10/601871		Filing Date
							Applicant(s)		
							* May be used for additional claims or amendments		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep
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Total Indep	1								
Total Depend	6								
Total Claims	7								
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10/60/871

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Depend	6					
Total Claims	7					

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Total Indep						
Total Depend						
Total Claims						